Address to: MS: Patent Application
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

UTILITY PATENT APPLICATION TRANSMITTAL AND FEE SHEET

Transmitted herewith for filing under 37 CFR §1.53(b)(1) is a **continuation** of prior Application No. 10/294,408, filed November 14, 2002.

Appli	cant	(or identifier):	PORTMANN ET AL.					
Title:			CRYSTAL MODIFICATION OF A PHARMAEUTICAL AGENT					
Enclo	sed	are:						
1. 2. 3.	\boxtimes	Drawings - 2 sh Declaration and a. Newly b. Copy signed i. Be Signed	d Power of Attorney executed (original or copy) from a prior application (signed or with indication that original was d) eletion of Inventors gned statement attached deleting inventor(s) named in the prior					
4.		application Incorporation By Reference The entire disclosure of the prior application, from which a copy of the Declaration and Power of Attorney is supplied under Box 3b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by						
5. 6. 7. 8. 9. 10. 11. 12. 13.		Nucleotide and Computer Paper Cop Statement Preliminary Am Assignment Pa English Transla Information Dis Certified Copy Return Receipt	nputer Program (appendix) /or Amino Acid Sequence Submission Readable Copy by Verifying Identity of Above Copies endment pers (Cover Sheet & Document(s)) ution of closure Statement of Priority Document(s)					
\boxtimes	App requ	lication No. 10/2	invention or species that is different from that elected in parent 294,408 in the event of a restriction or election of species dentical or substantially similar to that made in said parent y reserved.					

Filing fee calculation:

Before calculating the filing fee, please enter the enclosed Preliminary Amendment.
Before calculating the filing fee, please cancel claims .

Basic Filing Fee											
Multiple Dependent Claim Fee (\$ 290)											
Foreign Language Surcharge (\$ 900)											
	For	Number Filed		Number Extra		Rate					
Extra Claims	Total Claims	15	-20	0	×	\$	18	=	\$		
	Independent Claims	3	-3	0	×	\$	86	=	\$		
TOTAL FILING FEE											

Please charge Deposit Account No. 19-0134 in the name of Novartis in the amount of \$770. An additional copy of this paper is enclosed. The Commissioner is hereby authorized to charge any additional fees under 37 CFR §1.16 and §1.17 which may be required in connection with this application, or credit any overpayment, to Deposit Account No. 19-0134 in the name of Novartis.

Please address all correspondence to the address associated with Customer No. 001095, which is currently:

Thomas Hoxie Novartis Corporate Intellectual Property One Health Plaza, Building 430 East Hanover, NJ 07936-1080

Please direct all telephone calls to the undersigned at the number given below and all telefaxes to (973) 781-8064.

Respectfully submitted,

Date: February 26, 2004

Joseph J Borovian
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